



09-03-03

2665

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PTO/SB/21 (6/98)
Approved for use through 9/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (To be used for all correspondence after initial filing)	Application No.	09/510,905
	Filing Date	February 23, 2000
	First Named Inventor	John A. Thodiyil
	Group Art Unit	2665
	Examiner Name	Justin M. Philpott
Total Number of Pages in this Submission:	Attorney Docket No.	SUN-P3992

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached	<input type="checkbox"/> Assignment Papers for an application	<input type="checkbox"/> After-Allowance Communication to Group
<input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration(s)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Power of Attorney by Assignee, with Revocation of Former Powers	<input checked="" type="checkbox"/> Additional Enclosure(s): <input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Response to Missing Parts Notice/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Check for \$ _____
	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> _____
	<input type="checkbox"/> Small Entity Statement	
	<input type="checkbox"/> Request for Refund	
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Name	Daniel E. Vaughan (Registration No. 42,199)	Date	September 2, 2003
Signature	<i>Daniel E. Vaughan</i>	Telephone	650/474-1973
Address	702 Marshall Street, Suite 310, Redwood City, CA 94063	Facsimile	650/474-1976

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the U. S. Postal Service as <input checked="" type="checkbox"/> Express Mail (No. EL 978 246 139 US) or <input type="checkbox"/> First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on: <u>September 2, 2003</u>			
Type or Printed Name	Daniel E. Vaughan	Signature	<i>Daniel Vaughan</i>

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PATENT & TRADEMARK OFFICE

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Complete if Known

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TOTAL AMOUNT OF PAYMENT (\$) 0

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number: 50-1801
Deposit Account Name: Park, Vaughan & Fleming LLP

- ☒ Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:
☐ Check ☐ Credit card ☐ Money ☐ Other Order

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$) 0

2. EXTRA CLAIM FEES

Total Claims	30	-31**=	0	X	Fee from below	Fee Paid	0
Independent Claims	5	-5**=	0	X		0	
Multiple Dependent						0	

**or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet.	
1053 130	1053 130	Non-English specification	
1812 2520	1812 2520	Request for <i>ex parte</i> reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1840*	1805 1840*	Requesting publication of SIR after Examiner action	
1251 110	2255 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1450	2354 725	Extension for reply within fourth month	
1255 1970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1510	1451 1510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1300	2453 650	Petition to revive - unintentional	
1501 1300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee for provisional applications	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify) _____

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0

SUBMITTED BY

Name (Print/Type)	Daniel E. Vaughan	Registration No. (Attorney/Agent)	42,199	Telephone	650-474-1973
Signature	<i>Daniel E. Vaughan</i>	Date	September 2, 2003		

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